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MEDTRONIC LAW DEPARTMENT - CONFIDENTIAL

Attention: Centralized Fax Number

Company: United States Patent and Trademark Office

Telephone:

Facsimile: 571-273-8300

Application No.: 10/698,676

Filing Date: October 31, 2003

From: Anna M. Nelson

Telephone: 763-505-0409

Facsimile: 763-505-0411

Our Ref. No.: P-11666.00

Date: November 7, 2005

Pages (including cover page): 15

I hereby certify that this correspondence is being facsimile transmitted to the USPTO on the date shown above:

1. USPTO Transmittal
2. Fee transmittal
3. 8 pg Response to Office Action
4. 1 pg Petition for and Extension of Time
5. IDS with 1pg 1449 form

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Anna M. Nelson, 48,935

Reg. No.

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PTO/SB/17 (12-04v2)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

Complete If Known

Application Number	10/898,676
Filing Date	October 31, 2003
First Named Inventor	Gerber et al.
Examiner Name	Kasztejna
Art Unit	3739
Attorney Docket No.	P-11666.00

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order None Other (please identify): _____ Deposit Account Deposit Account Number: 13-2546 Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues) Fee (\$): 50 Small Entity Fee (\$): 25Each independent claim over 3 (including Reissues) Fee (\$): 200 Small Entity Fee (\$): 100Multiple dependent claims Fee (\$): 360 Small Entity Fee (\$): 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	=		HP = highest number of total claims paid for, if greater than 20.		

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=		HP = highest number of independent claims paid for, if greater than 3.		

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) Fee Paid (\$): _____Other (e.g., late filing surcharge): One month extension fee \$120.00 IDS Fee 180.00 Fee Paid (\$): _____

SUBMITTED BY

Signature	<i>Anna M. Nelson</i>	Registration No. 48,935 (Attorney/Agent)	Telephone 763.505.0409
Name (Print/Type)	Anna M. Nelson		Date November 7, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/21 (08-04)

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FORM

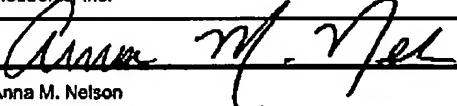
(To be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/688,676
Filing Date	October 31, 2003
First Named Inventor	Gerber et al.
Art Unit	3739
Examiner Name	Kasztejna Matthew
Attorney Docket Number	P-11666.00

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Medtronic, Inc.		
Signature			
Printed name	Anna M. Nelson		
Date	November 7, 2005	Reg. No.	48,935

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Jodi D. Nickel

Date

November 7, 2005

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PATENT
Docket No.: P-11666.00US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Gerber et al. Group Art Unit: 3739
Application No.: 10/698,676 Examiner: Kasztejna
Filing Date: 10/31/2003 Due Date: November 5, 2005
For: TECHNIQUES FOR TRANSRECTAL DELIVERY OF
DENERVATING AGENT TO THE PROSTATE GLAND

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November 7, 2005.


Jodi Nickel

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Commissioner for Patents
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RESPONSE TO OFFICE ACTION

Introductory Comments

Responsive to the Office Action mailed July 5, 2005, please amend the above-identified application as indicated on the attached pages.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.